

# May 20, 2015 CDC Ebola Response Update

[Announcer] This program is presented by the Centers for Disease Control and Prevention.

When news hits about the spread of diseases, it can be alarming. Being well informed can help calm fears. Today's podcast answers common questions about Ebola, including "Am I at risk?", "How do I know if I have it?", and "Can I get it from others?"

Here in the United States, the chances of you getting Ebola, or coming in contact with someone with Ebola, are *very* small. Ebola is spread primarily through direct contact with the body fluids of an infected person, or from objects, like needles, that have been in contact with infected body fluids. Ebola does *not* spread through the air like flu, or through food or water. Now let's answer some common questions:

**How do I know if I have Ebola?** Symptoms of Ebola—fever, vomiting, diarrhea, or stomachache—can look like those of other, more common illnesses. If you're in the United States, these symptoms are most likely *not* caused by Ebola. That's because Ebola lives in blood and other body fluids, such as urine, feces, saliva, vomit, sweat, or semen. To catch Ebola, one of these body fluids from someone who is sick with Ebola must get into *your* body through a break in your skin or enter through your mouth, eyes, or nose. Unless you've been around someone who is sick with Ebola and had direct contact with their body fluids, it's very unlikely that you have Ebola. The few people who caught Ebola in the United States were treating patients who were incredibly sick with Ebola.

**Should I be worried that I might have contact at school or work with someone who could give me Ebola?** People in the United States with any level of risk for Ebola are being monitored. Public health workers will know right away if someone becomes sick, help the sick person get care immediately, and then ensure that the person's contact with others is limited. Because a person can't spread Ebola until symptoms begin, anyone who has contact with a person *before* they got sick is *not* at risk. Furthermore, even if you were around a healthy person who recently had contact with someone who had Ebola, this does *not* put you at risk.

**Am I at risk if I live, work, or go to school with someone from West Africa?** No. A person who was born in West Africa has no more risk for Ebola than anyone else. Viruses like Ebola do not target any particular population. Even if someone recently traveled to Guinea, Liberia, or Sierra Leone, if they don't have symptoms, they do not put others at risk.

**Am I at risk if I know someone who traveled recently to or from Africa?** Africa is a big continent, and there are only two countries there that still have Ebola outbreaks—Guinea and Sierra Leone. People traveling to and from unaffected countries in Africa are *not* considered to be at risk. However, all travelers coming from Liberia, Sierra Leone, or Guinea are screened for symptoms before leaving the country and again when they enter the United States. Travelers without fever or symptoms consistent with Ebola are monitored for 21 days by state and local health departments to make sure they don't develop symptoms.

Returning responders are people who helped control the outbreak at its source. If you know someone who volunteered to fight the outbreak in West Africa, please thank them for their hard work and show them kindness and respect. Remember that even if they were exposed, they cannot spread the disease unless they have symptoms.

For more information about Ebola transmission, please visit [CDC.gov/Ebola](http://CDC.gov/Ebola).

[Announcer] For the most accurate health information, visit [www.cdc.gov](http://www.cdc.gov) or call 1-800-CDC-INFO.